

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>FW</i>	<i>32</i>	<i>1/31</i>
FORMALITY REVIEW	<i>AK</i>	<i>931</i>	<i>03/29/01</i>
RESPONSE FORMALITY REVIEW	<i>4-S</i>	<i>943</i>	<i>11-6-1</i>
	<i>BE</i>	<i>2077</i>	<i>03-03-02</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	12/18/02
2	✓
3	✓
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Claim	Date
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If more than 150 claims or 10 actions  
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3013 U.S. PTO

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